PHA Plans

Streamlined Annual Version

U.S. Department of Housing and **Urban Development**

Office of Public and Indian Housing

OMB No. 2577-0226 $(\exp. 08/31/2009)$

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan for Fiscal Year: 2008

PHA Name: Housing Authority of the

County of Richland

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

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Streamlined Annual PHA Plan Agency Identification

	ear Beginning: 07/2008				
X Public Housir fumber of public house fumber of S8 units:	ns Administered: ng and Section 8 Section 8 Sing units: Number of S8 unit Ortia: (check box if submitting a	ts: N	Public Housing Only umber of public housing units: A Plan and complete t		
	Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
	Participating PHA 1:				
	Participating PHA 2:				
	Participating PHA 3:				
	ntact Information: Mitchell, Executive Director		18-395-2571 ole): richland@wabash	.net	,

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Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection.	X Yes
☐ No. If yes, select all that apply:	
X Main administrative office of the PHA	
PHA development management offices	
Main administrative office of the local, county or State government	
Public library PHA website Other (list below)	
PHA Plan Supporting Documents are available for inspection at: (select all that apply)	
X Main business office of the PHA PHA development management offices	
Other (list below)	
Streamlined Annual PHA Plan	
Fiscal Year 2008	
[24 CFR Part 903.12(c)]	
Table of Contents [24 CFR 903.7(r)]	
Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection	n.
A. PHA PLAN COMPONENTS	
1. Site-Based Waiting List Policies	
903.7(b)(2) Policies on Eligibility, Selection, and Admissions	
X 2. Capital Improvement Needs	
903.7(g) Statement of Capital Improvements Needed	
3. Section 8(y) Homeownership	
903.7(k)(1)(i) Statement of Homeownership Programs 4. Project-Based Voucher Programs	
i. Troject Based voucher frograms	

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- X 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- X 6. Supporting Documents Available for Review
- X 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- X 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace:

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

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1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

The PHA does not operate site-based waiting lists.

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

2.	What is the number of	site based waiting li	st developments to which fam	nilies may apply at one time?	
3.	How many unit offers	may an applicant tur	n down before being removed	I from the site-based waiting li	st?
4.		scribe the order, agre	ement or complaint and descr	plaint by HUD or any court or ibe how use of a site-based wa	

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B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year? 0
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? N/A If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously N/A If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? N/A PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) 2. Capital Improvement Needs [24 CFR Part 903.12 (c), 903.7 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. Capital Fund Program
1. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Tes X No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where

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such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- 1. Yes X No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
 - 2. Status of HOPE VI revitalization grant(s): N/A

HOPE VI Revitalization Grant Status		
a. Development Name:		
b. Development Number:		
c. Status of Grant:		
Revitalization Plan under development		
Revitalization Plan submitted, pending approval		
Revitalization Plan approved		
Activities pursuant to an approved Revitalization Plan underway		
3. Yes X No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year? If yes list development pame(s) below:		
If yes, list development name(s) below: 4. Yes X No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:		

5. Yes X No: V	Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:
	ant Based AssistanceSection 8(y) Homeownership Program FR Part 903.12(c), 903.7(k)(1)(i)
(II applicable) [24 Cl	FR Part 905.12(c), 905.7(k)(1)(1)
1. Yes X No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)
2. Program Descript	tion: N/A
a. Size of Program Yes No:	Will the PHA limit the number of families participating in the Section 8 homeownership option?
	If the answer to the question above was yes, what is the maximum number of participants this fiscal year?
b. PHA-established Yes No:	eligibility criteria Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:
c. What actions will	the PHA undertake to implement the program this year (list)?
3. Capacity of the Pl	HA to Administer a Section 8 Homeownership Program: N/A
Establishing a least 1 percer Requiring that the state or Fo	a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at at of the purchase price comes from the family's resources. At financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by ederal government; comply with secondary mortgage market underwriting requirements; or comply with septed private sector underwriting standards.

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Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below): Demonstrating that it has other relevant experience (list experience below):
4. Use of the Project-Based Voucher Program
Intent to Use Project-Based Assistance
Yes X No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no, go to the next component. If yes, answer the following questions.
1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
low utilization rate for vouchers due to lack of suitable rental units access to neighborhoods outside of high poverty areas other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):
5. PHA Statement of Consistency with the Consolidated Plan [24 CFR Part 903.15]
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.
1. Consolidated Plan jurisdiction: State of Illinois
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

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X	The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
	The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the
	development of the Consolidated Plan.
	The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
X	Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated
	Plan. (list below)
	* The Housing Authority will continue to offer quality affordable housing to families and
	Elderly in its public housing program and housing payment assistance to those families
	In the tenant-based program.
	Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The Consolidated Plan "Action Plan" for 2007 states that the state will do the following through IHDA:

- Provide updates to its Resource Guide on PHA homeownership programs.
- Provide NOFA distribution to statewide housing organizations and advocacy groups on federal and state funding programs.
- Provide limited application review via the certification of consistency process.
- Participation of interested groups, including PHA groups, on its Advisory Committee.

6. Additional Information

THE HOUSING AUTHORITY OF THE COUNTY OF RICHLAND IS IN FULL COMPLIANCE WITH THE VIOLENCE AGAINST WOMEN'S ACT AND THE ILLINOIS CARVON MONOXIDE DETECTOR ACT.

THE HOUSING AUTHORITY HAS AN AGREEMENT BETWEEN THE LOCAL WOWAN/FAMILY SHELTER, STOPPING WOMAN ABUSE NOW (SWAN) AND WILL WORK WITH THE AGENCY THRU REFERRALS, FOLLOW-UPS AND FEEDBACK. THE PHA WILL HAVE BROCHURES AVAILABLE TO ALL RESIDENTS, APPLICANTS AND LEASE UPS THAT MEETS THE NOTIFICATION REQUIRMENTS OF THE VAWA, IN THE RECEPTION AREA OF THE OFFICE.

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If otherwise qualified, no applicant, or resident will be denied admission by Richland County for being a victim of domestice violence etc. The Housing Authority will offer programs and service to satisfy this act.

ALL REQUIRED HOUSING AUTHORITY UNITS HAD CARBON MONOXIDE DETECTORS INSTALLED PRIOR TO JANUARY 1, 2007 AS REQUIRED BY THE STATE OF ILLINOIS.

7. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;	5 Year and Annual Plans		
X	PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan	Streamlined Annual Plans		
X	Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.	5 Year and standard Annual Plans		
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans		
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs		
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources		
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies		
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. X Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public housing rent determination policies, including the method for setting public housing flat rents. X Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination		

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List of Supporting Documents Available for Review			
Applicable & On Display	Supporting Document	Related Plan Component	
X	Schedule of flat rents offered at each public housing development. X Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination	
X	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination	
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance	
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations	
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency	
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations	
X	Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance	
X	Public housing grievance procedures Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures	
X	Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures	
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs	
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs	
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs	
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs	
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition	
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing	
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing	
N/A	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing	
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership	
N/A	Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership	

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List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
X	Public Housing Community Service Policy/Programs x ☐ Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency		
N/A	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency		
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency		
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency		
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency		
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). X Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy		
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit		
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)		
	Consortium agreement(s) and for Consortium Joint PHA Plans Only: Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations		

RESIDENT ADVISORY BOARD MEMBERSHIP:

- 1. Helen Clark
- 2. Richard Hotsenpiller
- 3. Alex Knuckles
- 4. Rebecca Lomas
- 5. Grace Foerster
- 6. Sherri Miller

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Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: HOUSING AUTHORITY OF THE COUNTY OF RICHLAND Original Annual Statement Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 1) XPerformance and Evaluation Report for Period Ending: 03/30/08 Line No. Summary by Development Account Total non-CFP Funds Total non-CFP Funds 1406 Operations		rformance and Evaluation Report				
Capital Fund Program Grant No: i106p09650105 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 1) XPerformance and Evaluation Report for Period Ending: 03/30/08 Final Performance and Evaluation Report Total Summary by Development Account Total Estimated Cost Total Actual Cost Original Revised Obligated Expended			t Housing Factor	r (CFP/CFPRHF	') Part I: Summaı	:y
Replacement Housing Factor Grant No: 2005	PHA Name: HOUSING AU					
Original Annual Statement Reserve for Disasters/ Emergencies XPerformance and Evaluation Report for Period Ending: 03/30/08 X Revised Annual Statement (revision no: 1) Line No. Summary by Development Account Total Estimated Cost Total Actual Cost Original Revised Obligated Expended 1 Total non-CFP Funds Total non-CFP Funds Total non-CFP Funds Total non-CFP Funds					05	
XPerformance and Evaluation Report for Period Ending: 03/30/08 Final Performance and Evaluation Report Line No. Summary by Development Account Total Estimated Cost Total Actual Cost Original Revised Obligated Expended 1 Total non-CFP Funds Image: Cost of the cost of	Original Annual States				. 1)	2005
Line No.Summary by Development AccountTotal Estimated CostTotal Actual CostOriginalRevisedObligatedExpended1Total non-CFP Funds \blacksquare		_		•	,	
OriginalRevisedObligatedExpended1Total non-CFP FundsImage: Control of the con				Actual Cost		
1 Total non-CFP Funds	Line 140.	Summary by Development Account				
		TE () CED E 1	Original	Reviseu	Obligated	Expended
	2	1406 Operations				
3 1408 Management Improvements						
4 1410 Administration						
5 1411 Audit						
6 1415 Liquidated Damages		1 0				
7 1430 Fees and Costs 10,000 15,000 15,000 15,000			10,000	15,000	15,000	15,000
8 1440 Site Acquisition		1				
9 1450 Site Improvement						
10 1460 Dwelling Structures 70,000 35,000 35,000 35,000		<u>e</u>	70,000	35,000	35,000	35,000
11 1465.1 Dwelling Equipment—Nonexpendable						
12 1470 Nondwelling Structures	12					
13 1475 Nondwelling Equipment 40,507 56,740 56,740 56,740	13	1475 Nondwelling Equipment	40,507	56,740	56,740	56,740
14 1485 Demolition	14	1485 Demolition				
15 1490 Replacement Reserve	15	1490 Replacement Reserve				
16 1492 Moving to Work Demonstration	16	1492 Moving to Work Demonstration				
17 1495.1 Relocation Costs	17	1495.1 Relocation Costs				
18 1499 Development Activities	18	1499 Development Activities				
19 1501 Collaterization or Debt Service	19	1501 Collaterization or Debt Service				
20 1502 Contingency	20	1502 Contingency				
21 Amount of Annual Grant: (sum of lines 2 – 20) 106,740 106,740 106,740 106,740	21	Amount of Annual Grant: (sum of lines 2 – 20)	106,740	106,740	106,740	106,740
22 Amount of line 21 Related to LBP Activities	22	Amount of line 21 Related to LBP Activities				
23 Amount of line 21 Related to Section 504		Amount of line 21 Related to Section 504				
compliance						
24 Amount of line 21 Related to Security – Soft Costs	24	Amount of line 21 Related to Security – Soft Costs				
25 Amount of Line 21 Related to Security – Hard	25	Amount of Line 21 Related to Security – Hard				
Costs		Costs				

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary									
PHA Name: HOUSING AV	UTHORITY OF THE COUNTY OF RICHLAND	Grant Type and Number Capital Fund Program Grant No: il06p09650105 Replacement Housing Factor Grant No:							
□ Original Annual Statement □ Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 1) XPerformance and Evaluation Report for Period Ending: 03/30/08 □ Final Performance and Evaluation Report									
Line No.	Summary by Development Account	Total Estin	mated Cost	Total Actual Cost					
		Original	Revised	Obligated	Expended				
26	Amount of line 21 Related to Energy Conservatio Measures	n							

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the County of Richland		Grant Type a Capital Fund Replacement	Program	ber Grant No: IL0 Factor Grant N	Federal FY of Grant: 2005				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
H/As wide	A & E Fees	1430			15,000	15,000	15,000	15,000	
96-1	Parking Lot addition and repair	1460			35,000	35,000	35,000	35,000	
H/A wide	Storm and entry doors	1475			56,740	56,740	56,740	56,740	

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

Part III: Implementation Sci	neauie						
PHA Name:		Gran	t Type and	Number		Federal FY of Grant:	
Housing Authority of the Coun	ty of Richland	Cap	ital Fund Pr	ogram No: IL0	6P09650105	2005	
		Rep	lacement Ho	ousing Factor 1	No:		
Development Number	All F	und Obliga	ted	All	Funds Expende	ed	Reasons for Revised Target Dates
Name/HA-Wide Activities	(Quart	er Ending I	Oate)	(Qua	arter Ending Da	ite)	
	Original	Revised	Actual	Original	Revised	Actual	
IL 96-1&2	8/18/2007			08/17/2009			
1		1				1	

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: **Grant Type and Number Federal FY of Grant:** Housing Authority of the County of Richland Capital Fund Program Grant No: IL06P09650106 2006 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 1) **Summary by Development Account Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 24,418 0 0 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 5,000 10,000 0 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 0 60,000 75,000 1465.1 Dwelling Equipment—Nonexpendable 0 11 5,000 9.418 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 13 1485 Demolition 14 15 1490 Replacement Reserve 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 18 1499 Development Activities 19 1501 Collaterization or Debt Service 20 1502 Contingency 21 Amount of Annual Grant: (sum of lines 2 - 20) 94,418 102,406 Amount of line 21 Related to LBP Activities Amount of line 21 Related to Section 504 compliance 23 24 Amount of line 21 Related to Security – Soft Costs 25 Amount of Line 21 Related to Security - Hard Costs Amount of line 21 Related to Energy Conservation Measures 26

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the County of Richland		Grant Type a Capital Fund Replacement	Program	ber Grant No: IL0 Factor Grant N	Federal FY of Grant: 2006				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.			Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
H/As wide	A & E Fees	1430			5,000	10,000	0	0	
H/A wide	Roof Repair	1460			60,000	82,988	0	0	
H/A wide	Appliances	1465.1			5,000	9,418	0	0	

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

Part III: Implementation Sc	neutic		T	1 NT 1			E. L. LEW. C.C.
PHA Name:			l Number		Federal FY of Grant:		
Housing Authority of the Cour				06P09650106	2006		
		Repl	acement H	ousing Factor	No:		
Development Number	All Fu	nd Obligat	ed	All	Funds Expende	ed	Reasons for Revised Target Dates
Name/HA-Wide Activities		Ending D			arter Ending Da		
	Original	Revised	Actual	Original	Revised	Actual	
IL 96-1&2	07/18/2008			07/17/10			

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	ual Statement/Performance and Evalua	-						
Cap	ital Fund Program and Capital Fund P	rogram Replaceme	ent Housing Factor (CF	P/CFPRHF) Part	I: Summary			
PHA N		Grant Type and Number Capital Fund Program Gra						
	iginal Annual Statement Reserve for Disasters/ Emergrance and Evaluation Report for Period Ending:03/30/		atement (revision no:) ace and Evaluation Report					
Line	Summary by Development Account		Estimated Cost	Tota	l Actual Cost			
No.	Summary by Development Recount	Total	Estimated Cost	1044	Tretuir Cost			
		Original	Revised	Obligated	Expended			
1	Total non-CFP Funds				•			
2	1406 Operations	10,000	0					
3	1408 Management Improvements							
4	1410 Administration							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs	10,000	15,000					
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	74,418	84,502					
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Nondwelling Structures							
13	1475 Nondwelling Equipment							
14	1485 Demolition							
15	1490 Replacement Reserve							
16	1492 Moving to Work Demonstration							
17	1495.1 Relocation Costs							
18	1499 Development Activities							
19	1501 Collaterization or Debt Service							
20	1502 Contingency							
21	Amount of Annual Grant: (sum of lines 2 – 20)	94,418	99,502					
22	Amount of line 21 Related to LBP Activities							
23	Amount of line 21 Related to Section 504 compliance							
24	Amount of line 21 Related to Security – Soft Costs							
25	Amount of Line 21 Related to Security – Hard Costs							

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Ann	ual Statement/Performance and Evaluat	ion Report					
Cap	ital Fund Program and Capital Fund Pro	ogram Replacement	Housing Factor (CI	FP/CFPRHF) Part I:	Summary		
	g Authority of the County of Richland	Grant Type and Number Capital Fund Program Grant No Replacement Housing Factor G		Federal FY of Grant: 2007			
	iginal Annual Statement Reserve for Disasters/ Emerge rmance and Evaluation Report for Period Ending:03/30/08		nent (revision no:) nd Evaluation Report				
Line	Summary by Development Account	Total Esti	Total Ac	Total Actual Cost			
No.		Original	Original Revised Obligated				
26	Amount of line 21 Related to Energy Conservation Measures						

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Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Housing Authority of the County of Richland		Program C	rant No: IL0	0:	Federal FY of Grant: 2007			
General Description of Major Work Categories	Dev. Acct No.				nated Cost	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Operations	1406			10,000				
A & E Fees	1430			10,000				
Roof Repair	1460			84,502				
								<u> </u>
	the County of Richland General Description of Major Work Categories Operations A & E Fees	the County of Richland Grant Type a Capital Fund Replacement General Description of Major Work Categories Operations 1406 A & E Fees 1430	the County of Richland Capital Fund Program Greplacement Housing Face Programs General Description of Major Work Categories Operations A & E Fees Dev. Acct No.	Replacement Housing Factor Grant N General Description of Major Work Categories Operations 1406 A & E Fees 1430	the County of Richland Capital Fund Program Grant No: IL06P09650107 Replacement Housing Factor Grant No: General Description of Major Work Categories Dev. Acct No. Original Operations 1406 10,000 A & E Fees 1430 10,000	the County of Richland Capital Fund Program Grant No: IL06P09650107 Replacement Housing Factor Grant No: General Description of Major Work Categories Dev. Acct No. Original Operations 1406 Operations 1430 10,000	the County of Richland Capital Fund Program Grant No: IL06P09650107 Replacement Housing Factor Grant No: General Description of Major Work Categories Dev. Acct No. Original Operations 1406 Operations 1430 Federal FY of Gameral No: IL06P09650107 Replacement Housing Factor Grant No: Original Revised Funds Obligated 10,000 A & E Fees 1430 10,000	the County of Richland Capital Fund Program Grant No: IL06P09650107 Replacement Housing Factor Grant No: General Description of Major Work Categories Dev. Acct No. Original Revised Federal FY of Grant: 2007 Formal: 2007 Federal FY of Grant: 2007 Formal: 2007

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule PHA Name: **Grant Type and Number Federal FY of Grant:** Housing Authority of the County of Richland Capital Fund Program No: IL06P09650107 2007 Replacement Housing Factor No: Development Number All Fund Obligated All Funds Expended Reasons for Revised Target Dates (Quarter Ending Date) Name/HA-Wide Activities (Quarter Ending Date) Original Original Revised Revised Actual Actual IL 96-1&2 06/30/2009 06/29/2011